PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number 54404 US 008

CLAIMS AS FILED - PART I (Column 1)						(Column 2) SMALL ENTITY				OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			25				Γ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA	E	BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			2√ minus 20=		• 5			X\$ 9=		OR	X\$18=	90
INDEPENDENT CLAIMS			2 minus 3 =		*			X40=		ÓR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	L	TOTAL		OR	TOTAL	RDD
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALLE	NTITY	OR	OTHER SMALL E	THAN
		(Column 1) CLAIMS			IEST	(Column 3)	Г		ADDI-	j		ADDI-
NT A		REMAINING AFTER AMENDMENT		NUM PREVIO		PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
AMENDMEN	Total		Minus	**		= ,		X\$ 9=		OR	X\$18=	
AMEI	Independent	*	Minus	***				X40=		OR	X80=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	CLAIM			+135=		OR	+270=	
						- • •	L	TOTAL			TOTAL	
		Α	NDDIT. FEE		I~''	ADDIT. FEE						
		(Column 1) CLAIMS			mn 2) HEST	(Column 3)	1 r		ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**	•	=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	1 [X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	TCLAIM		┚┞	+135=		OR	+270=	
							L	TOTAL		OR	TOTAL	
								ADDIT. FEE		On	ADDIT. FEE	
		(Column 1)	-		mn 2) HEST	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREV	MBER HOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL · FEE
	Total	*	Minus	**	7	=	11	X\$ 9=	,	OR	X\$18=	
	Independent	*	Minus	***	·	=]	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									Un		
				C '	1_ 40P :	aluma O		+135=	·	OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
"	"If the "Highest Nu The "Highest Nur	imper Previously Pa her Previously Pa	aid For" (Total o	r Indepen	dent) is th	ne highest numb	er fou	ınd in the apı	oropriate bo	x in co	olumn 1.	